24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

NAME OF COMMITTEE (In Full)
MOVE MARYLAND FORWARD

FEC IDENTIFICATION NUMBER ▼
C C00622431

Check if ☒ 24-hour report   ☐ 48-hour report   ☒ New report   ☐ Amends report filed on   M M / D D / Y Y Y Y

Full Name of Payee
WERQ-FM

Mailing Address 1705 WHITEHEAD RD

City	State	Zip Code
GWYNN OAK	MD	21207

Purpose of Expenditure
RADIO ADS (10/31 - 11/05/2016)

Category/Type 004

Name of Federal Candidate
SZELIGA, KATHY, , ,

☒ Support
☐ Oppose

Date of Public Distribution/Dissemination
10 / 31 / 2016

Amount
12724.50

Transaction ID : SE.4212
Date of Disbursement or Obligation
10 / 25 / 2016

Office Sought: ☐ House   District: 00
☐ President   ☒ Senate   State: MD

Calendar Year-To-Date
Per Election for Office Sought
238338.50

Disbursement For: ☐ Primary   ☒ General
2016
☐ Other (specify) ▶ _____

Full Name of Payee

Mailing Address

City	State	Zip Code

Purpose of Expenditure

Category/Type

Name of Federal Candidate

☐ Support
☐ Oppose

Date of Public Distribution/Dissemination
M M / D D / Y Y Y Y

Amount

Date of Disbursement or Obligation
M M / D D / Y Y Y Y

Office Sought: ☐ House   District: _____
☐ President   ☐ Senate   State: _____

Calendar Year-To-Date
Per Election for Office Sought

Disbursement For: ☐ Primary   ☐ General
☐ Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures...▶ 12724.50

(b) SUBTOTAL of Unitemized Independent Expenditures ....▶

(c) TOTAL Independent Expenditures...▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KENNEY, J M, , ,
_____ *[Electronically Filed]*   Date 11 / 29 / 2016
Signature

: 97 ˙A =G7 9 @ 5 B9 CI G ˙H9 LH˙F9 @ 5 H98 ˙HC ˙5 ˙F9 DCFH ˙G7 < 98I @9 ˙CF ˙H9A =N5 H=CB

Form/Schedule: F24N
Transaction ID :

THE COMMITTEE MISSED FILING THIS FORM 24 AND IS SUBMITTING IT AFTER THE FACT.

Form/Schedule:
Transaction ID: